

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000015941

Entity Name: INSURANCE ADVISORS, LLC

FILED
Apr 24, 2012
Secretary of State

Current Principal Place of Business:

13720 CYPRESS TERRACE CIR., #301
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

13720 CYPRESS TERRACE CIR., #301
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 27-1907724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAHRS, SUEANN L
911 SE 31ST TER
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BAHRS, SUEANN L
Address: 911 SE 31ST TER
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM
Name: STEWART, JAMES C
Address: 5692 SHADDELEE LN W
City-St-Zip: FORT MYERS, F: 33904

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SUEANN BAHRS

MGRM

04/24/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date